REPUBLIC' SERVICES	Republic Service 18500 N. Allied Way, Phoenix, AZ 85054	es
SP	PECIAL WASTE DEPARTMENT DECIS	SION
	Waste Profile # Expiration Date 47182010099 1/31/2021	
I. Decision Request:	✓ Initial Recertification Chan	ge
Disposal Facility: 4718 - Newton Co. L/F Generator Name: ArcelorMittal USA LLC Generator Site Address: 3001 Dickey Road City: East Chicago Name of Waste: zinc filter media Estimated Annual Volume: 100 Tons II. Special Waste Department Decisi Management Method(s): Problematic Special Waste according to Rep If yes, which one? Approved by Special Waste Review Committed	ion: Approved Rejected Solidification Bioremediation Deep Woublic? Yes No Tee? Yes No No Not Applie	Zip: Vell Transfer Facility cable
Pre	ecautions, Conditions or Limitations on App	roval
		^
		~

Precautions, Conditions or Limitations on Approval

By signing below, the General Manager or Designee agrees that a fully executed Special Waste Service Agreement is on file for this profile and that the special waste file is complete.

Josh McGarry General Manager or Designee: Name (Printed): _

Date: 8/10/2020

Special Waste Profile



Disposal Facility: 4718 Newton	County Landfill IN		Wa	aste Profile #	#: 471820	010099	
			Sa	les Rep #:			
I. Generator Information							
Generator Name: ArcelorMit	tal USA, LLC						
Generator Site Address: 3001	Dickey Road						
City: East Chicago	County: Lal	ke	State:	Indiana		Zip:	46312
State ID/Reg No:	State Approval/W	Vaste Code:			NAIC	S #:	
Generator Mailing Address	(if different)						
City:	County:		State:	Select Sta	te	Zip:	
	n Barnett		Email	:			
Phone Number: 219.399.23		Ext:	Fax N	lumber: 2	19.399.3	034	
210.000.20					10.000.0	001	
II. Billing Information							
Bill To:		Contact	Name:				
Billing Address:			Email:			24	
City:	State:Selec	ct State	Zip:		Phone:		
III. Waste Stream Information Name of Waste: Zinc Filter Media							
Process Congrating Waste:							
#4	Blast Furnace wat	er treatment pla	ant filtration	on system	n		
Type of Waste: Industrial Proce	ss Waste Physic	cal State: Solid			f Shipment:	Bulk	
Estimated Volume: 100	Disease		olume Type:	Tons	1		
Frequency: On-going Waste Str	eam Disposai	Consideration: Lar	ndfill				
IV. Representative Sample Cert	ification						
☐ No Sample Taken							
✓ Sample Taken Type of Sample Grab Sample Is the representative sample collected to prepare this profile and laboratory analysis, collected in accordance with U.S. EPA 40 CFR							
261.20(c) guidelines or equiva		profile and laborate	ny analysis,	collected III	accordance	WIGH U.S	J. LI A 40 CFR
Sample Date: 07-30-2020	Sample ID Numbers or SDS:	20G1883-01					

Remember to attach Laboratory Analytical Report (and/or Material Safety Data Sheet) including Chain of Custody and required parameters provided for this profile.

Special Waste Profile

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 Coal Sand (quartz gravel) water as moisture 			60%			
			39%			
			1%			
lor:	Odor (describe):	Does Waste Contain Free Liquids?	% Solids:	pH:	Flash Point	
ack	none	□Yes ☑No	100	N/A	N/A	0
tach Laboratory ovided for this p RA Regulatory (profile.	d/or Material Safety Data Sheet) incl	uding Chain of (Custody and req	uired paramete	rs
Does this waste or	generating process contain	n regulated concentrations of the following les), Lindane, Methoxychlor, Toxaphene, 2,4			☐ Yes	☑N
. Does this waste contain reactive sulfides (greater than 500 ppm) or reactive cyanide (greater than 250 ppm) [reference 40 CFR 261.23(a)(5)]?				☐ Yes	✓N	
B. Does this waste contain regulated concentrations of Polychlorinated Biphenyls (PCBs) as defined in 40 CFR Part 761?				☐ Yes	☑N	
4. Does this waste contain concentrations of listed hazardous wastes defined in 40 CFR 261.31, 261.32, 261.33, including RCRA F-Listed Solvents?			☐ Yes	☑N		
5. Has this waste been delisted under 40 CFR 260.20 and 260.22? If yes, attach the final decision to delist the waste as published in the Federal Register.			☐ Yes	☑ N		
		eristic as defined by Federal and/or State reg e is hazardous as defined by Federal, State c		entify the	☐ Yes	☑N
Does this waste co as defined in 40 CF		ions of 2,3,7,8-Tetrachlorodibenzodioxin (2,	3,7,8-TCCD), or any	other dioxin	☐ Yes	☑N
8. Is this a regulated Medical or Infectious Waste as defined by Federal and/or State regulations?				☐ Yes	☑N	
9. Is this a regulated Radioactive Waste as defined by Federal and/or State regulations?				☐ Yes	✓N	
10. Is this a solid waste that is not a hazardous waste in accordance with 40 CFR 261.4(b)? If yes, please provide the corresponding regulatory citation.					☐ Yes	☑N
public Services	Waste Handling Quest	ions				
. Does this waste generate heat or react when contacted with water/moisture?				Yes	ØΝ	
Does the waste contain sulfur or sulfur by-products?				☐ Yes	✓N	
. Is this waste generated at a State or Federal Superfund cleanup site subject to regulation under CERCLA?			Yes	☑N		
4a. Is this waste from a TSD facility, TSD-like facility or consolidator (i.e. multiple wastes/multiple generators)?				☐ Yes	☑ N	
. Is this waste from						

Special Waste Profile



VI. Certification

I hereby certify that to the best of my knowledge and belief, the information contained herein is a true, complete and accurate description of the waste material being offered for disposal and all known or suspected hazards have been disclosed. All Analytical Results/Material Safety Data Sheets submitted are truthful and complete and are representative of the waste.

I further certify that by utilizing this profile, neither myself nor any other employee of the company will deliver for disposal or attempt to deliver for disposal any waste which is classified as toxic waste, hazardous waste or infectious waste, or any other waste material this facility is prohibited from accepting by law. I shall immediately give written notice of any change or condition pertaining to the waste not provided herein. Our company hereby agrees to fully indemnify this disposal facility against any damages resulting from this certification being inaccurate or untrue.

I understand that attaching an electronic signature, I am signing this document, consent to complete this transaction and receive all related communication electronically, and agree this document will be binding as though I had physically signed it. A printout of this document may be accepted with the same authority as the original.

If electronic signature is preferred, please submit completed (unsigned) form to your Special Waste Coordinator or Special Waste Sales Executive to initiate signature process.

I further certify that the company has not altered the form or content of this profile sheet as provided by Republic Services.

Tom Bara A	non. / En. Tech	Aralorm, Wal It
Authorized Representative Name (Printed)	Title (Printed)	Company Name
1 an Band		8/5/2020
Representative Sign	nature	Date